

PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: **Mail** Mail Stop ISSUE FEE
Commissioner for Patents
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Alexandria, Virginia 22313-1450
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SEP. 08 2006

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

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00140 7590 07/11/2006

LADAS & PARRY
26 WEST 61ST STREET
NEW YORK, NY 10023

09/12/2006 RMEBRAH1 00000101 09977646

01 FC:2501 700.00 OP
02 FC:1504 300.00 OP

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Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

William R. Evans	(Depositor's name)
September 5, 2006	
(Signature)	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/977,646	10/15/2001	Saverio Mascolo	U 013666-5	3228

TITLE OF INVENTION: END-TO END BANDWIDTH ESTIMATION FOR CONGESTION CONTROL IN PACKET SWITCHING NETWORKS

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE
Nonprovisional	YES	\$700	\$300	\$0	\$1000	10/11/2006

EXAMINER	ART UNIT	CLASS-SUBCLASS
CHANKONG, DOHM	2152	370-232000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
- (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 _____

2 Ladas & Parry LLP

3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

4a. The following fee(s) are submitted:

4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)

- Issue Fee
- Publication Fee (No small entity discount permitted)
- Advance Order - # of Copies _____

A check is enclosed.

Payment by credit card. Form PTO-2038 is attached.

The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 12-0425 (enclose an extra copy of this form).

5. Change in Entity Status (from status indicated above)

a. Applicant claims SMALL ENTITY status. Sec 37 CFR 1.27.

b. Applicant is no longer claiming SMALL ENTITY status. Sec 37 CFR 1.27(g)(2).

NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office.

Authorized Signature _____

Date September 5, 2006

Typed or printed name William R. Evans

Registration No. 25858

This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

2. Applicant

A. Asserted small entity status in this application by

payment of the basic filing or national fee as a small entity (37 C.F.R. § 1.27(c)(3)) or

prior submission of a Written Assertion or Statement of Small Entity Status (37 C.F.R. § 1.27(c)(1))

It is confirmed that small entity status for this application has been checked, is still in effect and is being asserted.

A WRITTEN ASSERTION OR STATEMENT OF SMALL ENTITY STATUS signed by an appropriate party as required by 37 C.F.R. § 1.27 is attached.

WARNING: *"Payment of a fee in other than the small entity amount is not sufficient notification that small entity status is no longer appropriate." 37 C.F.R. § 1.27(g)(2).*

(complete the following, as applicable)

B. Applicant hereby notifies the Office, in accordance with the requirements of 37 C.F.R. § 1.27(g)(2), that it no longer has status as a small entity.

A "NOTIFICATION OF LOSS OF STATUS AS SMALL ENTITY" signed by an appropriate party is attached.

Applicant has not asserted small entity status.

3. Fee (37 C.F.R. 1.18(a) and (b)):

Application status is:	<u>Regular</u>	<u>Design</u>
small business entity—fee	<input checked="" type="checkbox"/> \$ 700.00	<input type="checkbox"/> \$400.00
other than a small entity—fee	<input type="checkbox"/> \$1,400.00	<input type="checkbox"/> \$800.00
Publication Fee	<input checked="" type="checkbox"/> \$ 300.00	

4. Payment of fee:

Enclosed please find check for \$ 1,000.00.

Charge Account 12-0425 for any fee deficiency or credit overpayment.

Charge Account _____ the sum of \$ _____
A duplicate of this request is attached.



SIGNATURE OF PRACTITIONER

Reg. No.

William R. Evans, 25858, (212) 708-1930
(type or print name of practitioner)

Tel. No.:

P.O. Address

Customer No.:

c/o Ladas & Parry LLP
26 West 61 Street
New York, N.Y. 10023